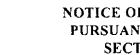
# FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

1428366

OMB APPROVAL 3235-0076 OMB Number:

May 31, 2005 Expires: Estimated average burden hours per response.....16.00

SEC USE ONLY Prelix Serial DATE RECEIVED

08022812	UNIFORM	LIMITED OFF	ERING EXEM	PTION L	
Name of Offering ( chec	k if this is an amendment a	nd name has changed, and	d indicate change.)		
Private Placement of Limi			- <u></u>		
Filing Under (Check box(es) the	hat apply) Rule 504	4 🔲 Rule 505 🛭 Rule	e 506 🔲 Section 4(6)	ULOE	9EC
Type of Filing:	iling Amendment				Wail Processing
		A. BASIC IDENTIFIC	ATION DATA		Sistem.
I. Enter the information req	uested about the issuer				FEB 25 YHHA
Name of Issuer (  check if	this is an amendment and	name has changed, and in	dicate change.)		
NewWest Fund II-A LP		-			sst -Markon DC
Address of Executive Offices		(Number and Street, C	ity State Zin Code)	Telephone Nui	Washington, DC nber (Including Area Code)
8110 East Union Avenue,	Suite 100 Denver Cold	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	303-764-9677	7 020
Address of Principal Business (if different from Executive O	Operations		City, State, Zip Code)		mber (Including Area Code)
Brief Description of Business  A debt/equity later-stage in	nvestment fund with a fo	ocus on investments in	n small to mid-sized	companies	PROCESSED
Type of Business Organization					FED 2 8 com
corporation		tnership, already formed	other (	please specify):	FEB 2 8 2008
business trust	limited part	tnership, to be formed			/ IHOMSON
Actual or Estimated Date of Ir Jurisdiction of Incorporation of	or Organization: (Enter two		e abbreviation for State	mated ::	F!NANCIAL
GENERAL INSTRUCTION	S				
Federal: Who Must File: All issuers ma 77d(6).	king an offering of securities	s in reliance on an exempti	ion under Regulation D	or Section 4(6), 17	CFR 230.501 et seq. or 15 U S.C
					led filed with the U.S. Securities at that address after the date of

which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

### A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers, and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Henry, David L. Business or Residence Address (Number and Street, City, State, Zip Code) 8110 East Union Avenue, Suite 100, Denver, Colorado 80237 Beneficial Owner Executive Officer ☐ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Winter, Chester Business or Residence Address (Number and Street, City, State, Zip Code) 8110 East Union Avenue, Suite 100, Denver, Colorado 80237 Executive Officer Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Arenberg, Daniel K. Business or Residence Address (Number and Street, City, State, Zip Code) 8110 East Union Avenue, Suite 100, Denver, Colorado 80237 Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner General and/or Managing Partner Full Name (Last name first, if individual) NewWest Capital Group LLLP Business or Residence Address (Number and Street, City, State, Zip Code) 8110 East Union Avenue, Suite 100, Denver, Colorado 80237 General and/or Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City. State. Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State. Zip Code)

					B. 13	NFORMATI	ON ABOU	T OFFERI	NG				
l.	Has the	issuer sale	l or does th	he iccuer ir	stend to se	i to non-w	ccredited i	nvestors in	this offeri	nσ?		Yes	No <b>⊠</b>
٠.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								<u> </u>	12:			
2.									s_20,	00.00			
									Yes	No			
3.													
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	l Name (i one	Last name	first, if indi	ividual)									
_		Residence	Address (N	lumber and	Street, C	ity, State. 2	ip Code)		<del></del>				
											<del></del> -	<del></del>	
Nai	me of Ass	sociated Bi	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	***************************************	*************		***************************************	************		□ VI	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	[ID]
		IN	IA (NIX)	KS	KY	LA	ME	MD	MA	MI	MN OK	MS OR	MO PA
	MT RI	NE SC	NV SD	(NH)	NJ TX	NM] UT]	NY) VT)	NC VA	ND WA	OH) (WV)	WI	WY	PR
No	ot Applica	ble	first, if ind		d Street, C	City, State,	Zip Code)						•
Na	me of Ass	sociated Bi	roker or De	aler		<del></del>	- National Control of the Control of						
Sta	tes in Wh	ich Persor	Listed Ha:	s Solicited	or Intends	to Solicit	Purchasers		<del></del>	***************************************			
	(Check	"All State:	s" or check	indiviđual	States)							☐ A!	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Н	ID
	IL	lN	IA	KS	KY	LA	MEI	MD	MA	MI	MN	M5	MO
	MT RI	NE SC	NV SD	NH]	[N]	NM UT	NY VT	NC VA	WA	OH W∇	OK WI	OR WY	PA PR
	I Name (	Last name	first, if ind										
	Applicab		: Address (1	Number of	d Street C	Situ State	7in Codal						
Du	2111¢22 OI	Kesigelice	: Address (i	Number an	u sacci, c	ity, state, i	cip Code)						
Na	me of Ass	sociated B	raker or De	aler	-		-					<del></del>	
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ Ai	I States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
		LOC.	(30)	LIN		تاب	<u> </u>		(** (*)	لئن	٠		لجنب

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	:	
	Type of Security	Aggregate Offering Price	Amount Afready Sold
	Debt	s	\$
	Equity		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)		\$
	Partnership Interests	<u>\$ 4,000,000.00</u>	\$ 1,730,000.00
	Other (Specify )	\$	\$
	Total	<u>\$_4,000,000.00</u>	\$_1,730,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases § 1,730,000.00
	Accredited Investors		~
	Non-accredited Investors		\$ 0.00
	Total (for filings under Rule 504 only)	18	<u>\$_1,730,000.00</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securitie sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		ss
	Printing and Engraving Costs		§ 0.00
	Legal Fees		\$_2,500.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify) travel and postage		s 500.00
	Total		\$_3,000.00

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
		•	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		] \$	. 🗆 \$
	Purchase of real estate		] <b>\$</b> _	. [] <b>S</b>
	Purchase, rental or leasing and installation of macl	hinery [	<b></b>	s
	Construction or leasing of plant buildings and faci	lities	] \$	<b>S</b>
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse issuer pursuant to a merger)	ts or securities of another	]\$	
	Repayment of indebtedness			
	Working capital			
	Other (specify): The issuer will make debt/equity	y and later stage investments in	] <b>\$</b>	. [] \$
	mid-sized companies			3 997 000 00
			] <b>\$</b>	- D \$ 0,557,000.00
	Column Totals	[	s_ <u>0.00</u>	\$_3,997,000.00
	Total Payments Listed (column totals added)		_	,997,000.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commis	sion, upon writti	ule 505, the following on request of its staff,
	uer (Print or Type)	Signature 01	Date	
	wWest Fund II-A LP	( la Set face)	2-18	-2008
Na	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
Da	id L. Henry	Managing Partner of NewWest Capital Group	LLLP,	
_	<u>.                                  </u>	L		

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
.1	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	№0   <b>X</b>

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
NewWest Fund II-A LP	Green beeg 2-18-7008
Name (Print or Type)	Title (Print or Type)
David L. Henry	Managing Partner of NewWest Capital Group LLLP,

### Instruction.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AF	PENDIX				
t	Intend to non-ac		Type of security and aggregate offering price offered in state (Part C-Item 1)		4  Type of investor and amount purchased in State (Part C-Item 2)				ification ate ULOE attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	,	1_							
AK									
AZ									
AR									1
CA						1			
со		X	limited partnership	16	\$1,530,000	0	\$0.00		X
СТ	_								. 1
DE									
DC	,								
FL		,							
GA									
ні									
ID									Ţ: <u> </u>
IL		X	limited partnership	1	\$100,000.0	0	\$0.00		X
ľN								[	,
IA									
KS		Ī							
KY									
LA	<del></del>								[
ME									
MD									!
MA									
мі							1		
MN									
MS	-							<u> </u>	

				APP	ENDIX				
	Intend to non-a investors	to sell coredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо	,							1	
МТ									
NE									
ΝV	l	. ,							
NH									
lи								:	
NM									
NY					_			1	Ī
NC	<i>y</i>								
ND									
ОН		,							
ок									
OR									
PA									
RI		1							
SC							_		
SD	4-8								- ·
TN									
тх									
UT									
VT							1		
VA									1
WA		X	limited partnership	1	\$100,000.00	0	\$0.00		X
wv	,								
WI			_						<u> </u>

	APPENDIX											
		2	3		4							
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

